Fill in this infor	Fill in this information to identify your case:				
Debtor 1	Joseph John Gan	dy			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number	17-24802				
(

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

	,		
info	is complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend or original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,900.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,900.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	5,800.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	59,715.00
	Your total liabilities	\$	65,515.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,000.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,445.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Value dabte are not primarily concurred dabte. You have nothing to report on this part of the form. Check this	hay and a	hanit this form to

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
From Fart 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,800.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,800.00

Fill ir	n this info	mation to identify your cas	e:					
Debto	or 1	Joseph John Gandy						
		First Name		Last Name	•			
Debto	or 2 se if, filing)	First Name	Middle Name	Last Name				
(Spous	se ii, iiiirig)			Lasi Name	•			
Unite	d States B	ankruptcy Court for the: D	ISTRICT OF NEW JERSEY					
Case	number	17-24802						
(if knov	wn)						■ Check	if this is an
							amend	ed filing
Ott:	sial Far	40C⊏/⊏						
		<u>m 106E/F</u>		N - !	_			40/45
			D Have Unsecured C					12/15
Sched Sched left. At	ule G: Exec ule D: Cred tach the Co	utory Contracts and Unexpired itors Who Have Claims Secure	t could result in a claim. Also list I Leases (Official Form 106G). Do i d by Property. If more space is ned f you have no information to repor	not inclu eded, co	de any cree py the Part	ditors with partially s you need, fill it out, r	ecured claims that a number the entries ir	re listed in the boxes on the
Part	1: List	All of Your PRIORITY Unsec	cured Claims					
1. D	o any credi	tors have priority unsecured cl	aims against you?					
	No. Go to	Part 2.						
	Yes.							
id po	lentify what to ssible, list t	ype of claim it is. If a claim has be he claims in alphabetical order ac	a creditor has more than one priority oth priority and nonpriority amounts, coording to the creditor's name. If you lar claim, list the other creditors in P	list that c u have m	laim here ar	nd show both priority a	nd nonpriority amount	s. As much as
(F	or an expla	nation of each type of claim, see	the instructions for this form in the ins	struction	booklet.)	Total claim	Priority amount	Nonpriority amount
					Gandy,		amount	amount
2.1	Interna	al Revenue Service	Last 4 digits of account	number	Joseph	\$2,200.00	\$2,200.00	\$0.00
	P.O. B	Creditor's Name ox 7346 elphia, PA 19101	When was the debt incur	rred?				
		Street City State Zlp Code	As of the date you file, th	ne claim	is: Check a	ll that apply		
,	Who incurr	ed the debt? Check one.	☐ Contingent					
	Debtor 1	only	☐ Unliquidated					
	Debtor 2	only	☐ Disputed					
		and Debtor 2 only	Type of PRIORITY unsec	ured cla	im:			
		one of the debtors and another	☐ Domestic support oblig	ations				
	_	this claim is for a community	debt Taxes and certain other	er debts v	ou owe the	government		
		subject to offset?	☐ Claims for death or per	-		-		
	■ No	-	Other. Specify	,	•			
	☐ Yes		2011	-2014				

Internal Revenue Service (SP)	Deb	tor 1 Joseph John Gandy		Case numb	er (if know)	17-24802	
Special Procedures 200 Sheffield Street Mountainside, NJ 07092 Number Street City State 2 Decide Who incurred the debt7 Check one.	2.2	` ,	Last 4 digits of account number	•	\$0.00	\$0.00	\$0.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? NA J Attorney General Office Check if this claim is for a community debt is the claim subject to offset? NA J Attorney General Office Check if this claim is for a community debt is the claim subject to offset? NA J Attorney General Office Check if this claim is for a community debt is the claim subject to offset? NA J Attorney General Office Check if this claim is for a community debt is the claim subject to offset? NA J Attorney General Office Check if this claim is for a community debt is the claim subject to offset? Note of Street St. P.O. Box 112 Tranton, NJ 08625-0112 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only As of the date you file, the claim is: Check all that apply Check if this claim is for a community debt is the claim subject to offset? NJ Division of Taxation Fincity Creditor's Name Compliance & Enforcement-Bankruptcy Signarck Street, 9th Fi P.O. Box 245 Trenton, NJ 08989-0267 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debt		Special Procedures 200 Sheffield Street	When was the debt incurred?				
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Debtor 2 only		Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Yes Domestic support obligations Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only D		■ Debtor 1 only	☐ Unliquidated				
At least one of the deltors and another Domestic support obligations Check if this claim is for a community debt is the claim subject to offset? No Yes		☐ Debtor 2 only	☐ Disputed				
Check if this claim is for a community debt is the claim subject to offset? Collims for death or personal injury while you were intoxicated		☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
Last 4 digits of account number Gandy, So.00 So.00 So.00 So.00		☐ At least one of the debtors and another	☐ Domestic support obligations				
Last 4 digits of account number Gandy, So.00 So.00 So.00 So.00		☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the gover	nment		
NJ Attorney General Office Last 4 digits of account number Joseph \$0.00 \$0.00 \$0.00							
NJ Attorney General Office Last 4 digits of account number Gandy, So.00 So.0		■ No	☐ Other. Specify				
NJ Attorney General Office Last 4 digits of account number Joseph \$0.00 \$0.00 \$0.00		Yes					
Priority Creditor's Name DiVIsion of Law Richard J. Hughes Justice Complex 25 Market St, P.O. Box 112 Trenton, NJ 08625-0112 Number Street City State 2ip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Yes As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Debtor 1 street city state 2ip Code Who incurred the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes No Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Yes No Debtor 2 only Debtor 2 only Debtor 3 name Compliance & Enforcement-Bankruptcy So Barrack Street, 9th FI P.O. Box 245 Trenton, NJ 08695-0267 Number Street City State 2ip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 4 and Debtor 3 only Debtor 4 and Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 1 and Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Taxes and certain other d	0.0	N.I. Attornov Conoral Office			00.02	00.00	\$0.00
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Debtor 1 and Debtor 2 only		■ Debtor 1 only	☐ Unliquidated				
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Is the claim subject to offset? No Yes Claims for death or personal injury while you were intoxicated		☐ At least one of the debtors and another	☐ Domestic support obligations				
No Other. Specify No Other. Specify Other. Specify		☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the gover	nment		
Yes Yes		Is the claim subject to offset?	\square Claims for death or personal inj	ury while you were	e intoxicated		
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Compliance & Enforcement-Bankruptcy 50 Barrack Street, 9th FI P.O. Box 245 Trenton, NJ 08695-0267 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? Shall incurred? As of the date you file, the claim is: Check all that apply I Contingent Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated No Other. Specify	2.4		Last 4 digits of account number	_Josepn	ψ3,000.00	ψ3,000.00 ————————————————————————————————	Ψ0.00
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□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Other. Specify □ Other. Specify		Debtor 1 only	☐ Unliquidated				
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Other. Specify		Debtor 2 only	☐ Disputed				
☐ Check if this claim is for a community debt Is the claim subject to offset? No □ Other. Specify		☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated No ☐ Other. Specify		☐ At least one of the debtors and another	☐ Domestic support obligations				
Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated No ☐ Other. Specify		☐ Check if this claim is for a community debt	■ Taxes and certain other debts v	ou owe the gover	nment		
■ No □ Other. Specify		-	-	-			
		■ No	<u></u>				
		Yes					

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

Debt	or 1 Joseph John Gandy	Case number (if know) 17-24802	
	No. You have nothing to report in this part. Submit t	this form to the court with your other schedules.	
	Yes	,	
u th	nsecured claim, list the creditor separately for each cl	alphabetical order of the creditor who holds each claim. If a creditor has more tha aim. For each claim listed, identify what type of claim it is. Do not list claims already inc creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	luded in Part 1. If more
			Total claim
4.1	AT&T Mobility	Last 4 digits of account number 0411	\$631.00
	Nonpriority Creditor's Name	<u> </u>	
	PO Box 537104	When was the debt incurred?	-
	Atlanta, GA 30353 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Phone bill	-
4.2	Capital One	Last 4 digits of account number 2378	\$965.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Bankruptcy Dept P.O. Box 30273	when was the debt incurred?	-
	Salt Lake City, UT 84130		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit cards (2)	_

Debto	or 1 Joseph John Gandy		Case number (if know)	17-24802	
4.3	Causeway Nissan	Last 4 digits of account number	Gandy, Joseph		\$1,025.00
1.0	Nonpriority Creditor's Name c/o NJ Automotive Accts Management P.O. Box 1996	When was the debt incurred?			
	Brick, NJ 08723 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify NSF check			
4.4	Credit One	Last 4 digits of account number	5803		\$603.00
	Nonpriority Creditor's Name P.O. Box 98873	When was the debt incurred?			
	Las Vegas, NV 89193 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Credit card			
4.5	E-ZPass NJ Violations Processing Nonpriority Creditor's Name	Last 4 digits of account number	5690	_	\$11.00
	P.O. Box 52005 Newark, NJ 07101	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharir	o plans, and other similar d	ebts	
	Yes	Other. Specify Toll violation	אוע		

Debtor	1 Joseph John Gandy	Case number (if know) 17-24802					
4.6	Fingerhut/WebBank	Last 4 digits of account number 1429	\$636.00				
	Nonpriority Creditor's Name P.O. Box 1250 Saint Cloud, MN 56395	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Charge account					
	First Premier Bank	Gandy,	\$463.00				
4.7	Nonpriority Creditor's Name	Last 4 digits of account number Joseph	\$403.00				
	P.O. Box 5519 Sioux Falls, SD 57117	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit card					
		Gandy,					
4.8	Infiniti Financial Services	Last 4 digits of account number Joseph	\$17,000.00				
	Nonpriority Creditor's Name Bankruptcy Dept P.O. Box 660366	When was the debt incurred?					
	Dallas, TX 75266						
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Auto lease deficiency/2015 Nissan Altima					

Debtor	Joseph John Gandy	Case number (if know) 17-24802	
	Kay Jewelers	Last 4 digits of account number 0033	\$495.00
	Nonpriority Creditor's Name DNF Associates 352 Sonwil Drive	When was the debt incurred?	
	Cheektowaga, NY 14225 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Charge account	
U	Kohi's	Last 4 digits of account number 3852	\$593.00
	Nonpriority Creditor's Name P.O. Box 3043 Milwaukee, WI 53201	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	□ Yes	Other. Specify Charge account	
4.1	Milestone Nonpriority Creditor's Name	Last 4 digits of account number 4524	\$581.00
	P.O. Box 4499 Beaverton, OR 97076	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card	

	Case number (if know) 17-24802		Joseph John Gandy
\$607.00	Gandy, Joseph	Last 4 digits of account number	Montgomery Ward & Seventh
		When was the debt incurred?	lonpriority Creditor's Name 112 7th Avenue Monroe, WI 53566
	s: Check all that apply	As of the date you file, the claim is	lumber Street City State ZIp Code
			/ho incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	Debtor 2 only
		☐ Disputed	Debtor 1 and Debtor 2 only
	claim:	Type of NONPRIORITY unsecured	At least one of the debtors and another
		☐ Student loans	Check if this claim is for a community
	ration agreement or divorce that you did not		ebt
	a plane, and other similar debte	report as priority claims Debts to pension or profit-sharing	s the claim subject to offset?
	•		No ☑ Yes
	15 (2)	Other. Specify Charge acct	⊒ Yes
\$1,003.00	4005	Last 4 digits of account number	lew York & Co
		-	onpriority Creditor's Name
		When was the debt incurred?	Comenity Bank
			P.O. Box 182789 Columbus, OH 43218
	s: Check all that apply	As of the date you file, the claim is	umber Street City State ZIp Code
			/ho incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	Debtor 2 only
		☐ Disputed	Debtor 1 and Debtor 2 only
	claim:	Type of NONPRIORITY unsecured	At least one of the debtors and another
		☐ Student loans	Check if this claim is for a community
	ration agreement or divorce that you did not		ebt
		report as priority claims	s the claim subject to offset?
	•	Debts to pension or profit-sharing	No
	ount	Other. Specify Charge acco	Yes
\$17,636.00	2839	Last 4 digits of account number	lissan/Infiniti
, , ,			onpriority Creditor's Name
		When was the debt incurred?	P.O. Box 660366
	e. Chock all that apply	As of the date you file the claim is	Dallas, TX 75266 lumber Street City State Zlp Code
	S. Oncor all that apply	As of the date you file, the claim is	/ho incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	Debtor 2 only
		☐ Disputed	Debtor 1 and Debtor 2 only
	claim:	Type of NONPRIORITY unsecured	At least one of the debtors and another
		☐ Student loans	Check if this claim is for a community
			ebt
	ration agreement or divorce that you did not		
	ration agreement or divorce that you did not	report as priority claims	the claim subject to offset?
		report as priority claims Debts to pension or profit-sharing	s the claim subject to offset? ■ No

Debto	Joseph John Gandy	Case number (if know) 17-24802	
4.1 5	NJ Acute Care Specialists	Last 4 digits of account number 3227	\$369.00
	Nonpriority Creditor's Name P.O. Box 630707 Cincinnati, OH 45263	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.1	Robert Salerno	Last 4 digits of account number	\$10,216.00
	Nonpriority Creditor's Name PO Box 111751 Nashville, TN 37222	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify DC-008091-17 (Rent Deficency)	
4.1 7	TD Bank	Last 4 digits of account number 1301	\$938.00
	Nonpriority Creditor's Name Recovery Dept P.O. Box 9547	When was the debt incurred?	
	Portland, ME 04112 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Collection account	
	-	Carlot. Opcomy	

No 65 Vi	dewater Finance Company	Last 4 digits of account number 0880	\$2,027.00
65 Vi Nu			ΨΞ,0Ξ.100
Nu	520 Indian River Road irginia Beach, VA 23464	When was the debt incurred?	
	Ingilia Beach, VA 23404 Imber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
WI	ho incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
de Is	bt the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Charge account	
4.1 9 Uı	rgent Care Now Physicians	Last 4 digits of account number 1798	\$20.00
At	onpriority Creditor's Name ttn # 8594M O. Box 14000	When was the debt incurred?	
	elfast, ME 04915		
Nu	umber Street City State Zlp Code ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
de Is	bt the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.2 V 6	erizon Wireless	Last 4 digits of account number 0001	\$3,736.00
P.	onpriority Creditor's Name O. Box 4001	When was the debt incurred?	
Nu	cworth, GA 30101 umber Street City State Zlp Code ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
de	bt	☐ Obligations arising out of a separation agreement or divorce that you did not	
_	the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Phone bill	

Debio	Joseph John Gandy		17-24602	
4.2	Wells Fargo Bank	Last 4 digits of account number	3531	\$160.00
	Nonpriority Creditor's Name P.O. Box 14517	When was the debt incurred?		
	Des Moines, IA 50306 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Contingent☐ Unliquidated☐		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		paration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-shari	ing plans, and other similar debts	
	☐ Yes	Other Specify Charged of		
Part 3	List Others to Be Notified About a De	ebt That You Already Listed		
is try have	this page only if you have others to be notified ying to collect from you for a debt you owe to s more than one creditor for any of the debts th ied for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the collection agency	here. Similarly, if you
Name a	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	ount Control Systems	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Clair	ns
	/eterans Dr, Ste D nvale, NJ 07647	ı	Part 2: Creditors with Nonpriority Unsecured 0	Claims
NOILI	ivale, NJ 07047	Last 4 digits of account number	Montgomery Ward & Seventh	Ave
Name a	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	n Financial	Line 4.10 of (<i>Check one</i>):	\square Part 1: Creditors with Priority Unsecured Clair	ns
	Box 722929 ston, TX 77272		Part 2: Creditors with Nonpriority Unsecured 0	Claims
11003	non, 17, 17212	Last 4 digits of account number	Kohl's	
	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	a Recovery		Part 1: Creditors with Priority Unsecured Clair	
101	Greenwood Plaza Blvd, Ste nwood Village, CO 80111	1	Part 2: Creditors with Nonpriority Unsecured 0	Claims
Olec	iiwood viiiage, oo oo ii i	Last 4 digits of account number	Milestone	
	and Address	On which entry in Part 1 or Part 2 did yo		
	ral Credit Services Box 15118		Part 1: Creditors with Priority Unsecured Clair	
	sonville, FL 32239		Part 2: Creditors with Nonpriority Unsecured 0	Claims
		Last 4 digits of account number	First Premier Bank	
	and Address stopoher DiFrancia, Esq.	On which entry in Part 1 or Part 2 did yo Line 4.16 of (<i>Check one</i>):		
	East Main Street		☐ Part 1: Creditors with Priority Unsecured Clair ☐ Part 2: Creditors with Nonpriority Unsecured 0	
Tuck	erton, NJ 08087		■ Part 2: Creditors with Nonpriority Unsecured C	Jaims
		Last 4 digits of account number		
Diver	and Address r sified Consultants	On which entry in Part 1 or Part 2 did yo Line 4.20 of (<i>Check one</i>):	u list the original creditor? \square Part 1: Creditors with Priority Unsecured Clair	ns
	0 Deerwood Park, Blvd 309		Part 2: Creditors with Nonpriority Unsecured (Claims
Jacks	sonville, FL 32256	Last 4 digits of account number	Verizon Wireless	
Name a	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	Associates		☐ Part 1: Creditors with Priority Unsecured Clair	
	Sonwil Drive ktowaga, NY 14225	I	Part 2: Creditors with Nonpriority Unsecured 0	Claims
J1166		Last 4 digits of account number	Kay Jewelers	

Debtor 1 Joseph John Gandy	 Case number (if know)	17-24802
Name and Address Frontline Asset Strategies 2700 Snelling Ave N, Ste 250 Roseville, MN 55113	ou list the original creditor? ☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonpriority Fingerhut	
Name and Address Galaxy International Purchasing 4730 S. Fort Apache Road Las Vegas, NV 89147	ou list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpri	
Name and Address HRRG PO Box 189053 Plantation, FL 33318	☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonprior	ority Unsecured Claims
Name and Address IC System P.O. Box 64378 Saint Paul, MN 55164	NJ Acute Care Sp ou list the original creditor? ☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonpriority AT&T Mobility	Unsecured Claims
Name and Address LVNV Funding P.O. Box 10497 Greenville, SC 29603	<u>-</u>	ority Unsecured Claims
Name and Address LVNV Funding P.O. Box 10497 Greenville, SC 29603	ou list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonprio	
Name and Address MCM 2365 Northside Drive, Ste 300 San Diego, CA 92108	ou list the original creditor? ☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonprion	
Name and Address Merchants & Medical Credit 6324 Taylor Drive Flint, MI 48507	ou list the original creditor? ☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonpriority Kohl's	
Name and Address Southwest Credit Systems 4120 International Pkwy, Ste 1100 Carrollton, TX 75007	ou list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpri Verizon Wireless	
Name and Address Stenger & Stenger 2618 East Paris Ave SE Grand Rapids, MI 49546	ou list the original creditor? ☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonpriority Fingerhut	
Name and Address Synergetic Communication 5450 NW Central #220 Houston, TX 77092	ou list the original creditor? ☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonpriority TD Bank	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 5,800.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 5,800.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,715.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 59,715.00

Fill in this information to identify your case:					
Debtor 1	Joseph John Gandy				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY			
Case number	17-24802				
(if known)					

■ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read that they are true and correct.	the summary and schedules filed with this declaration and
X /s/ Joseph John Gandy	x
Joseph John Gandy Signature of Debtor 1	Signature of Debtor 2
Date August 17, 2017	Date